HUNTINGDONSHIRE COUNTY COUNCIL.

EDUCATION COMMITTEE.

Annual Report

OF THE

SCHOOL MEDICAL OFFICER

FOR THE YEAR

1916.

HUNTINGDON:

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To the Chairman and Members of the Huntingdonshire Education Committee.

My Lords, Ladies and Gentlemen,

I have the honour to present to you the Sixth Annual Report on the Medical Inspection of School Children in the Administrative County of Huntingdon.

Towards the end of I915 it was found that it would be impossible for the Medical Inspection to be carried on as it had been hitherto, and representation was accordingly made to the Board of Education. The Board, after consideration, intimated that it would be satisfied if one group of "A" Code was examined, and in addition, all children, irrespective of age, who in the opinion of the teacher or some other responsible person, suffered from any special defect.

After consultation with Captain Moss-Blundell it was decided that the "Leavers" should be selected, as it was felt, if any other group were taken, the leavers of 1916 would escape examination altogether, whereas either of the other groups would automatically be examined later on,

The Reinspections were to take place as usual.

On the whole, this arrangement has worked well; although it was a disappointment to several of the parents that the "Infants" were not examined, and in many cases, at the mother's request, the entrant was examined as a "special."

I have the honour to remain,

Your obedient Servant,

JENNETTE C. HARGRAVE,

Acting School Medical Officer.

Members of the Medical Inspection Sub-Committee.

C. G. TEBBUTT, Chairman.

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County Surveyor: HERBERT LEETE.

County School Medical Officer: C. B. Moss-Blundell, M.D., D.P.H., 36, High Street, Huntingdon.

Telephone:—Huntingdon 11.

Acting School Medical Officer: Dr. J. C. HARGRAVE.

REPORT

Ninety one Schools, comprising 110 departments are under your care, and in 1916 the average number of scholars on the register was 8693; with an average attendance of 7540.

Alterations and Improvements to School Buildings.

I am indebted to Mr. Gillson, Acting County Surveyor, for the following information;—

All School Lavatories, &c., have been whitewashed.

St. Ives.—Repairs to hedge, new fence erected and boy's urinial repaired.

FLETTON.—Heating apparatus repaired and stoke hole altered. Chimney altered and wall rebuilt. New radiator fixed, roof and urinrl repaired and drains cleaned.

BYTHORN. New stove.

ELLINGTON.—Lavatories repaired and playground regravelled.

Houghton.—New stove. Drains repaired.

RAMSEY COUNCIL.—Alterations to sanitary arrangements. Roof repaired.

RAMSEY HEIGHTS.—Floor and sink repaired. Drains unblocked.

Somersham. Repairs to roof floor and privy. Well cleaned out. New pumps, new soil pails.

COVINGTON. Drains relaid, ventilator fixed and cesspool cleaned.

EARITH. New copper for cookery room and new sanitary pails.

HILTON.—Stove repaired.

Huntingdon.—Pegs and hat rails altered.

Colne. New stove.

Arrangements adopted for Organization and Supervision.

As already mentioned, the following change was made in the arrangements for Medical Inspection. In the "A" Code group, the "Leavers" alone, were selected for routine examination. The examination of the "Specials," and the Re-inspections took place as formerly.

The usual number of visits for the purpose of Medical Inspection was made to each School and the arrangements made for the work of the nurses in the Schools were unchanged. In the Urban Districts the Nurse was present at the examination of the children and at the written request of the School Medical Officer she visited on other occasions, reported on any child she found suffering from some defect and followed up the case.

At present no provision is made for a School Nurse in any of the Rural Districts

Work of the District Nurses in "following up" Defective Children.

Home Visits.				
	Kind of Cas	ses Visited.		
No. of Visits.	No. of Verminous Cases.	No. of Other Cases.		
655	352	303		
	No. of Visits.	No. of Visits. No. of Verminous Cases.		

The Teachers have loyally co-operated in the work and have rendered valuable assistance in many ways. In one or two Schools, however, there is still a certain amount of indifference shown in the matter of cleanliness as regards the heads of the scholars, but speaking generally the Teachers take a keen interest in the matter.

THE ATTENDANCE OFFICERS have rendered valuable service by reporting cases which have been away from School without adequate treatment.

The methods adopted for securing the presence of parents at the inspection, &c., have been described previously.

Owing to the fact that most of the children examined were "leavers," and that many of the parents were undertaking work of national importance on the land or elsewhere, it was not to be expected that the proportion of parents present at the inspections would equal that of former years.

The following table, however, shows that there was only a very slight falling off in their attendance.

	19	15.		1916.	
	Boys.	Girls.		Boys.	Girls.
Entrants	61.99%	61.96%			
Intermediates	41.97%	47.61%	Specials	24%	26%
Leavers	29.7%	41.%		29%	40%

General Statement of the extent and scope of the Medical Inspection carried out during the year.

158 Routine visits were paid to 110 Departments and 1350 children were examined. Of this number 934 were Routine examinations and 416 were examined as "Specials."

In addition 487 children who were found defective at previous Inspections were re-examined in order to see what treatment, if any, had been obtained, and if necessary, to again draw the attention of the parent to the defect present.

Also a large number of children were examined for head conditions 5064.

In addition to the routine visits, 71 special visits were paid, either for some particular purpose such as epidemic diseases notified on Form M. 9, or as "surprise" visits.

All boys who had attained their 11th, and girls their 12th birthdays, were examined, and 29 girls who were within a month of their 12th birthday at the time of the inspection

were included in the examination.

Number of children examined.

A "Code" Group.

(0)				Leavers.		
Age	11	12	13	14	Other Ages.	Total.
Boys	413	49	11	• • •	1	474
Girls	29	403	19	8	1	460
Totals	442	452	30	8	2	934

B. Groups other than "Code."

	Special Cases.	Re- examinations.
Boys Girls	 206 210	487
Totals	 416	

Summary.

Routine Examinations		• •	934
Special			416
Re-examinations			487
	Tota	ul	1837
No. examined for Head co	nditio	ns	5064

Time Occupied.

It is impossible to estimate accurately the time occupied for inspection: much depended upon the assistance given by the teachers, and whether the parent was present or not. On a general average I should estimate that 10 to 12 seniors or intermediates and 14 to 15 infants per hour is a fair average. This does not include writing cards or making out forms.

Table II

Return of Defects found in the course of Medical Inspection.

	or Medicar	Inspec	OIOAL.		
		Code	Groups.	Spec	cials.
	Defect or Disease	Numbers referred for treatment	Numbers requiring to be kept under obser- vation but not referred for treatment.	Number referred for treatment	Numbers requiring to be kept under obser- vation but not referred for treatment
	(1)	(2)	(3)	(4)	(5)
	Malnutrition Uncleanliness:	8	109	3	23
	Hand	75	3	350	5
	Body	12	7	6	? 3
	(Ringworm:				
	Head	The state of the s	-	9	
Skin	Body				
OKIA	Scabies			4	
	Impetigo		$\frac{1}{6}$	2 5	$\frac{-}{12}$
	Other Diseases	4.5	17	75	16
Eye	Extornal Eva Discorce	0	7	5	$\frac{10}{22}$
773	Defective Hearing	10	32	18	27
Ear	Ear Disease	9	5	5	12
Nose &	Enlarged Tonsils		13	35	15
Throat.	Adenoids	22	20	50	22
TT	Defective Speech	_		3	6
Heart and	(Heart Disease:		3	1	1
circula-	Organic Functional	1	6		$\frac{1}{3}$
tion	Anæmia	3	$\overset{\circ}{2}$	2	
	Pulmonary Tuberculosis:				
	Definite	2		5	2 5
Lungs	Suspected	1	11	7	
	Chronic Bronchitis	1	3	0	1
	Other Disease	3	1	3	1
Nervous	{ Epilepsy			ı	
System	Chorea Other Disease				2
	Non-Pulmonary Tuberculosis:				
	Glands	4	3	5	
	· Bones and Joints	1	1	2	
	Other Forms	_	1	2	
	Rickets			1	$\frac{1}{2}$
	Deformities		8 8	5 5	<u>Z</u>
	Cther Defects or diseases	J	0	J	

General review of the facts disclosed by Medical Inspection.

NUTRITION.—In regard to nutrition various facts were taken into consideration, importance being attached to the general firmness of the tissues and the aspect of the individual as well as the ratio of height to weight.

As I noted in the Report in the Report for the year 1915, a large proportion (60%) of the children who suffered from impaired nutrition showed either some defect of the respiratory system, enlarged glands or other manifestation of probable tuberculosis.

A very small percentage was due to insufficient food.

There was a striking improvement in physique among those boys who had spent their spare time in working on the land.

Owing to the increased cost of materials it was not possible for the teachers in those schools where it was in force in 1915, to continue the good work of providing at small cost a cup of hot cocoa for the children who remained at school during the dinner hour. This is much to be regretted and it is to be hoped that later on the custom will be resumed.

CLOTHING AND FOOTGEAR.—The figures under these headings are taken from the report of the Head Teachers. It appears that of the boys about 2% had insufficient clothing and and less than 4% had unsatisfactory footgear.

Of the girls less than 2% had either insufficient clothing or unsatisfactory footgear.

Over 6% of the boys' clothing and over 4% of that of the girls was dirty and out of repair.

CLEANLINESS.—It is pleasant to record a great improvement in respect of personal cleanliness, particularly of head conditions. Five of the smaller schools were quite free even from "nits," and in most of the larger schools it was obvious the children were taking more pride in the care of their hair.

These results can only have been attained by unceasing vigilence on the part of the teachers.

One of the greatest problems is how to deal with the parent of the habitually dirty child. To inflict a small fine is of no use.

One family has come to live in this County because the fines imposed are lighter than in the district from whence they came.

Tonsils and Adenoids.—Operative treatment was recommended only in well marked cases; slight cases being advised to resort to "Handkerchief drill".

The ultimate result depends largely upon the thoroughness with which this is carried out.

VISION AND EXTERNAL EYE DISEASE.—About 9% of the children required some treatment for these conditions but of this number only 4% were "routine" cases.

It would be easier to persuade parents to have the defective vision corrected if there were some means of assisting them to procure glasses where necessary.

Many parents are adverse to buying spectacles for young children, as glasses are soon broken and are expensive to replace.

A County fund for such cases would appear to be almost a necessity.

TEETH:—Only 130 children had more than 4 teeth decayed. This may be accounted for by the age of the scholars examined.

Tuberculosis:—Nine cases of Pulmonary Tuberculosis were notified by the S.M.O. Seven children were sent to a Sanatorium.

The doubtful cases were advised what treatment to pursue and were encouraged to attend at the Office on Saturday mornings where they were weighed and a watch kept on their progress.

MENTAL CONDITION:—Three Children were found to be mentally defective, and 155 were, in the opinion of the teachers, below average intelligence. Most of these had some defect of hearing or sight.

In a few cases the history showed a low grade of intelligence throughout the family.

DEFORMITIES:—Most of the deformities were due to the effects of Infantile paralyses; but tuberculous disease of the joints was responsible for some of the cases.

HEART:—Heart disease was rare; nor were there many cases of rheumatism in the histories of antecedent illness.

Table IU—Treatment of Defects of Children during 1916.

Conditi o n.		No. of defects for which no report	No. of defects treated.	Results of Treatment.			No. of defects not	Percent- age of defects
	was con- sidered necessary	is available.	treated.	Remedied	Remedied Improved changed		treated.	treated.
Clothing	. 1		1		1	Allectrical	-	100.
Footgear	. 3		3	1	2		discharge	100.
Cleanliness of Head	. 435	28	407	91	227	89	- Charles - Char	93.
Cleanliness of Body	. 18		18	5	13			100.
Nutrition	. 11	2	9		8	1		81.8
Nose and Throat .	115	16	52	23	25	4.	47	45.2
External Eye Disease.	. 14	3	8	3	4.	1	3	57
Ear Disease	7	and the second second	4	1	3		3	56.
Teeth	33	4.	18	7	10	1	11	54.5
Heart and Circulation	7	3	4	1	3			56.
Lungs	19		19	-	12	7		100
Nervous System .	4		4	1	1	2	-	100.
Skin	37	5	30	16	12	2	2	81.
Tuberculosis Non-Pulmonary	14		14	_	9	5		100.
Vision and Squint	120	17	58	36	12	10	45	48.3
Hearing	28	3	15	1	12	2	10	54.
	866	81	664	186	354	124	121	

School Closure, 1916.

The following table shows the number of closures for infectious disease.

Coughs and Colds		• • •			No. of Schools.
Whooping Cough	• • •		• • •	• • •	8
Measles	• • •	• • •			1
German Measles		• • •		• • •	. 4
Scarlatina			• • •		2
Influenza	• • •	• • •	• • •	• • •	2
Chicken Pox	• • •	• • •			6
Diphtheria			• • •		1
					Salesmanado
					27

Exclusion of Individual Scholars.

The following children have been excluded by the S.M.O. upon the grounds indicated:—

Verminous Heads		• • •		• • •	85
Ringworm	• • •	• • •	• • •	• • •	6
Debility	• • •	• • •	4 0 0		4
Impetigo		• •			11
Epilipy	• • •			• • •	2
Nervous Debility				• • •	1
Mental Debility		• • •	• • •	• • •	1
Heart Disease	• • •		• • •	• • •	1
					111

Prosecutions.

There were 21 prosecutions for non-attendance and uncleanliness under the Attendance Bye-laws and in most cases a fine was imposed.

Blind, deaf, mentally or physically defective and epileptic children.

The following is a list of Deaf and Dumb children in Special Schools.—

		Cost p.a.	Parents Contributions.
1.	Girl	£33	1/6 per wk.
2.	Boy	£33	1/- per wk.
3.	Boy	£33	1/6 per wk.
4.	Boy	£33	1/- per wk.

And travelling expenses.

In an Industrial School.

Three boys at 3/- per week.

Sixteen Pupil Teachers, &c., were medically examined.

In only two instances were the teeth perfect and advice was given in every case of caries that a qualified dentist should be consulted.

In Conclusion.

I wish to take this opportunity to thank all those who have so kindly assisted me during the year.



